## Wisconsin Department of Safety and Professional Services

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## FUNERAL DIRECTORS EXAMING BOARD

## APPRENTICE SEMI-ANNUAL REPORT

This report must be completed and returned to the Funeral Directors Examining Board twice a year. Both the Apprentice and Funeral Director must sign the report. It must include the number of hours the Apprentice has been employed at the Establishment and the number of embalmings and funeral services the Apprentice has assisted in. Failure to complete and return this Form (#395) on each reporting period, could result in termination of the Apprenticeship.

Reporting Period From: January 1,						: June 30	0,							
Reporting Period From: July 1,					To	: Decem	ber 31,							
1.	1. If you attended a Mortuary school, provide the exact dates of attendance:													
	From: To: To:													
2.	· · · · · · · · · · · · · · · · · · ·													
	☐ Yes ☐ No If yes, provide exact dates:													
	From: / / /		То	: 🔲			/							
3.	bid you work as an Apprentice during the summer while not attending summer school?													
	☐ Yes ☐ No If yes, provide exact dates:													
	From: To: To:													
4.	Have you worked as an Intern during any period not listed in questions 1-3 listed above?													
☐ Yes ☐ No If yes, you may receive apprenticeship credit for a completed internship. Provide exact date									ates:					
	From: / / /		То	:										
Month J			FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
Total Number of Hours Employed														
Number of Assisted Embalmings														
Nu	Number of Funeral Services Assisted													
Under the penalties of perjury, I certify that the above data is correct to the best of my knowledge and belief.														
Apprentice Name						Apprentice Certificate Number								
Apprentice Signature					Da	te								
Funeral Director Name					Fu	Funeral Establishment Name								
Funeral Director Signature					Da	Date								

#395 (Rev. 8/15) Ch. 445, Stats.